Hourly Distribution

Crisis Intervention Team Training 8 hours OCT 13, 14, 18, 2011

Lesson 1.0 - Introduction

	1.1 Introduction and training goals	0800-0815
	1.2 Community and Law Enforcement Expectations and Standards	0815-0835
	1.3 Pre-Test	0835-0850
Break		0850-0900
Lesson 2	2.0- Mental Illness Overview	0900-0950
Break	·	0950-1000
Lesson 2	1 – Thought Disorders – Schizophrenia	1000-1030
Lesson 2	.2 – Mood Disorders – Bi-Polar Disorder	1030-1100
Break		1100-1110
Lesson 2	.3 – Mood Disorders – Major Depression	1110-1140
Lesson 2	.4 – Treatment Options (Medications)	1140-1200
Lunch		1200-1300
Lesson 3.	0 - Field Contacts with the Mentally III	1300-1350

Break	1350-1400
Lesson 3.1 – De-Escalation Techniques	1400-1450
Break	1450-1500
Lesson 3.2 – Field Tactics and Officer Safety	1500-1550
Break	1550-1600
Lesson 4.0 – Review and Post-Test	1600-1650

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Expanded Course Outline for Crisis Intervention Team Training

Lesson 1- Introduction

1.1 Introduction

- A. Introduction of course facilitators and participants
- B. Crisis Intervention Training objectives
 - 1. Improve understanding, judgment, competence and safety
 - 2. Improve communication skills
 - 3. Improve ability to identify and appropriately respond to individuals with mental health and/or developmental disabilities.
 - 4. Increase awareness of local resources

1.2 Why this training is important

- 1. Officers will encounter someone with these disabilities
- 2. Enhance safety of officers and community members
- 3. Improve management of high risk encounters
- 4. Improve ability to access resources

1.3 Pre-test

Lesson 2-Mental Illness Overview

- A. Defined as a medical (organic) illness or disease
- B. Characteristics of a mental illness
- C. Disturbances of mood
 - 1. Emotional "flatness"
 - 2. Inappropriate emotion
 - 3. Fluctuating moods
 - 4. Intensity of emotions
- D. Disturbance in thought
 - 1. Disorganized thought patterns
 - 2. Hallucinations
 - 3. Delusional thinking

Lesson 2.1- Schizophrenia

- A. Definition of schizophrenia
- B. Symptoms

- 1. Delusions
- 2. Hallucinations
- 3. Paranoia Concrete and disorganized thinking patterns

Lesson 2.2 - Bi Polar Disorder

- A. Bipolar Disorder
- B. Definition
- C. Symptoms
 - 1. Elevated Mood
 - 2. Agitation
 - 3. Reduced need for sleep
 - 4. Poor judgment
 - 5. Distractibility
 - 6. Mood Swings
 - 7. Pressured speech

Lesson 2.3 - Major Depression

- A. Definition
- B. Symptoms of depression
 - 1. Emotional
 - a. Sadness
 - b. Hopelessness, helplessness
 - c. Sense of worthlessness
 - d. Irritability at times, especially in children
 - 2. Cognitive
 - a. Poor concentration
 - b. Difficulty with memory
 - 3. Behavioral
 - a. Loss of interest in pleasurable activities
 - b. Sleep disturbance
 - c. Change in appetite

Lesson 2.4 - Treatment options for Mental Illness

- A. Medications
 - 1. Anti-anxiety medications
 - 2. Anti-depressants
 - 3. Anti-psychotics
 - 4. Seizure medications

- 5. Anti-mania medications
- B. Medication Side Effects
 - 1. Permanent side effects
 - 2. Weight gain/loss
 - 3. Loss of libido
 - 4. Tardive dyskinesia (involuntary movements, tics, grimaces etc.)
 - 5. Changes in personality (e.g. emotional reception/expression, etc.)

Lesson 3.0 - Field Contacts with the Mentally Ill

- A. Have Nots Poor & mostly homeless
- B. Can Nots Inability to conform due to mental illness
- C. Will Nots Refuse, per personal lifestyle choice (e.g. personality disorders), to conform to standards/demands
- D. Field observations of behaviors and symptoms
 - 1. Consciousness
 - 2. Activity
 - 3. Speech
 - 4. Thought Process

Lesson 3.1 – Officer Safety

- A. Why do we do this training?
- B. Avoid injuries to officers and consumers
- C. Avoid stigmatizing persons with Mental Illness
- D. Provide Suicide Assessment
- E. Homeless
 - 1. One third of all homeless have a serious mental illness
- F. What you don't know (or consider) can hurt you
 - 1. Demeanor
 - 2. Environment
 - 3. Awareness of you as an officer
 - 4. Danger Signs
- G. Using correct tactics and making the right decisions can save a persons life
- H. Thirty-Second Assessment

- 1. Do they know you are the police
- 2. Can they see (or visually focus on) you...
- 3. Can they hear you (are they understanding or processing verbal questions/commands)
- 4. Are they able to answer simple questions
- 5. Are they able to follow simple commands or directions

I. Primary Violence Predictors

- 1. History of past violence
- 2. Drug and alcohol abuse
- 3. Serious mentally ill person who has become combative

J. Tactical Considerations before arrival

- 1. Information from the reporting party
- 2. Available weapons
- 3. Location of the subject
- 4. Previous calls for service
- 5. Does the subject know the police are coming
- 6. Is the subject under self control

K. Tactical Considerations on arrival

- a. Assign officer responsibilities
- b. Assign back-up officer
- c. Control the scene
- d. Communicate with family members as appropriate

L. Prepare for Contingencies

- a. If it's working, keep doing it
- b. Is Taser your only weapon?

Lesson 3.2 – De-escalation techniques (TACT)

A. Time spent dealing with persons with Disabilities. Disconnect in training versus actual calls for service

B. Tone

- 1. It's not what you say, it's how you say it
- 2. Calm, firm demeanor
- 3. Negative remarks or threats by consumers
- 4. Non-Confrontational
- 5. Avoid impatience and/or condescension
- 6. Patient, polite, truthful
- 7. Encouragement

C. Atmosphere

1. Reduce Distractions

- 2. Calm the scene, lower radios, disruptive people
- 3. Personal space is critical. Do not crowd. Increase space as needed.
- 4. Avoid touching if possible.

D. Communication

- 1. Use first names if possible
- 2. One officer to speak
- 3. Use calm, slow, firm voice
- 4. Use simple directions
- 5. Repeat your commands/requests as many times as necessary
- 6. Make sure the subject understands your directions
- 7. Build a sense of security

E. Problem Communication

- 1. Non-Responsive? Do not assume (or rush to act on the worst)...
- 2. Make sure to use 30-second evaluation
- 3. Do not argue with expressed delusions
- 4. Help subject to feel safe
- 5. Help subject to focus on your voice
- 6. Ask subject what the voices are saying

F. Time

- 1. Be willing to take the time needed to safely complete call
- 2. Time is needed to process information
- 3. Goal is Voluntary Compliance
- 4. Allows de-escalation and venting
- 5. Rushing can lead to unplanned and violent response
- 6. Allows officer to disengage, reassess, make plan

Lesson 4.0 – Post-Test and Graduation